

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>KG</i>	<i>60200</i>	<i>3-25</i>
O.I.P.E. CLASSIFIER		<i>48</i>	<i>3/29/00</i>
FORMALITY REVIEW		<i>71622</i>	<i>5-30-00</i>
RESPONSE FORMALITY REVIEW		<i>71622</i>	<i>6/24/00</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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REST AVAILABLE COPY

If more than 150 claims or 10 actions  
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